PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless correct maintenance fee notifica	ed helow or directed off	ig the Patent, advance of icrwise in Block 1, by (a	a) specifying a new corre	spondence address; an	for (b) indicating a sep	arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
21839	7590 11/04	/2008	nav			
BUCHANAN, INGERSOLL & ROONEY PC POST OFFICE BOX 1404 ALEXANDRIA, VA 22313-1404				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885. on the date indicated below		
						(Depositor's nune)
						(Signature)
						(Date)
APPLICATION NO	FILING DATE	1	FIRST NAMED INVENTOR	Z AT	TORNEY DOCKET NO	CONFIRMATION NO
10/564,479 01/13/2006			Seppo Heimala		1034281-000002	9194
TITLE OF INVENTION	: METHOD FOR SMEL	TING COPPER CONCE	ENTRATES			
APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV PAID ISSUE FI	E TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	S1510	\$300	\$0	\$1810	02/04/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS]		
SHEVIN, MARK I.		1793	075-424000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1 363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached Use of a Customer Number is required. 			2 For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents If no name is listed, no name will be printed			
3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3 11. Completion of this form is NOT a substitute for filing an assignment (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) OUTOTEC OYJ ESPOO, FINLAND						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🚨 Individual 🚨 Corporation or other private group entity 🚨 Government						
	are submitted: No small entity discount p	permitted)	b Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card 华家城東区文別教芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸芸			
	itus (from status indicate		b. Applicant is no los	nger claiming SMALL	ENTITY status See 37 C	FR 1.27(g)(2)
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (if req records of the United Str	uired) will not be accepte ites Patent and Trademark	ed from anyone other than k Office.	the applicant; a register	ed attorney or agent; or t	he assignee or other party in
Authorized Signature Rose JANUARY 13, 2009						nderstands and the state of the
Typed or printed name ROBERT G. MUKAI Registration No. 28531						**************************************
an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 22,	ntiality is governed by 35 ed application form to the tions for reducing this bu Virginia 22313-1450 DO 313-1450.	o U.S.C. 122 and 37 CPR to USPTO, Time will vary orden, should be sent to the O NOT SEND FEES OR	on is required to obtain or 1.14. This collection is early depending upon the indice Chief Information Offic COMPLETED FORMS Tespond to a collection of in	vidual case. Any commer. U.S. Patent and Tra O THIS ADDRESS S	ties to complete, including the sents on the amount of the demark Office, U.S. Depender TO; Commissioner	of by the USPTO to process) in grathering, preparing, and time you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450.